SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235–0076
Expires: May 31, 2005
Estimated average burden
hours per response . . . 1.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Series A Preferred Stock and the underlying Common Stock issuable upon conversion of such Preferred Stock.
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
eSTIPS, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code)
546 Covington Road, Los Altos, CA 94024 650=988-8500
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) (Number and Street, City, State, Zip Code)
Table 1 and
Brief Description of Business
Software; Internet; e-mail
Type of Business Organization
☐ corporation ☐ limited partnership, already formed ☐ other (please specify):
business trust I imited partnership, to be formed
Month Year
Actual or Estimated Date of Incorporation or Organization: 0 5 Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada; FN for other foreign jurisdiction) D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

		A. BASIC IDENTI	FICATION DATA		
 Each beneficial own securities of the issu 	e issuer, if the issumer having the po- er;	er has been organized with wer to vote or dispose, or	direct the vote or dispos		more of a class of equity
Each executive officEach general and ma		corporate issuers and of co partnership issuers.	rporate general and manag	ing partners of pa	rtnership issuers; and
Check Box(es) that Apply:	⊠ Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, if Gingres, Richard	individual)				
Business or Residence Addres 546 Covington Roa	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Hutchison, Don	individual)				
Business or Residence Addres 657 Sunset Way, E	•	• • • • •			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, if Dreyman, Daniel	individual)				
Business or Residence Addres 435 Tasso Street, S	•			······································	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Kurnit, Scott	individual)				
Business or Residence Addres 236 East 47 th Street					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if Amicus Capital, L.)					
Business or Residence Addres 1005 Sansome Stree		eet, City, State, Zip Code) Francisco, CA 94111			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Gordon, Arik	individual)				
Business or Residence Addres					
4 Hanote'A Street,					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Sundsted, Todd					
Business or Residence Addres 427 Shadeswood Di	-				
427 Shadeswood Di		sheet, or copy and use add	itional copies of this sheet,	, as necessary.)	

					B. INFOR	MATION	ABOUT O	FFERING					
												Yes	No
1.	Has the iss	uer sold, or de	oes the issu						_		********		\boxtimes
	1721				-	•		ling under U			•		
2.	What is the	e minimum in	vestment th	nat will be	accepted fi	om any ind	ividual?				\$		
3.	Does the o	ffering permit	t joint owne	ership of a	single unit	?						Yes	No
4.	Enter the	information 1	equested f	or each p	erson who	has been	or will be	paid or giv	en, directly	or indirect	ly, any		
	a person to states, list	n or similar re to be listed is a the name of the lealer, you ma	an associate the broker	ed person or dealer.	or agent of If more th	a broker o nan five (5)	r dealer reg	istered with be listed as	the SEC an	d/or with a	state or		
Full 1	Name (Las	t name first, it	f individual)									
Busir	ness or Res	idence Addre	ss (Numbe	r and Stree	t, City, Sta	te, Zip Cod	e)						
Name	e of Assoc	ated Broker o	or Dealer					· · · · · · · · · · · · · · · · · · ·					
~		Person Liste											
(C	heck "All :	States" or chec	ck individu	al States)			,	••••••					1 States
[AI	L] [AF	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[I D]
[][.] [IN	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[IM]	[MN]	[MS]	[M)]
[M]	T] [NI	E) [NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	.] .
[R	[1]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P F	:]
Full	Name (Las	t name first, i	f individua	1)									
Busin	ness or Res	sidence Addre	ss (Numbe	r and Stree	et, City, Sta	ite, Zip Cod	le)					·	
Name	e of Assoc	iated Broker o	or Dealer										
	• • • • • • • • • • • • • • • • • • • •	area Broker c	,, 200.0.										
State	s in Which	Person Liste	d Has Solic	ited or Int	ends to Sol	icit Purcha	sers						
(C	heck "All	States" or che	ck individu	al States).		• • • • • • • • • • • • • • • • • • • •				•••••		□ A!	l States
[A]	L] [Al	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H1]	[ID	1
		[IA]							-		[MS]	[M	-
[M				[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	
[R	-		[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[P F	
Full	Name (Las	t name first, i	f individua	1)									
Busin	ness or Re	sidence Addre	ess (Numbe	r and Stree	et, City, Sta	ite, Zip Cod	le)						
													
Nam	e of Assoc	iated Broker o	or Dealer										
State	s in Which	Person Liste	d Has Solid	cited or Int	ends to So	licit Purcha	sers				···· ··· · · · · · · · · · · · · · · ·		
(C	heck "All	States" or che	ck individu	al States)	• • • • • • • • • • • • • • • • • • • •		••••••					□ A.	l States
[A]	L] [A	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]	_] [IN	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	0]
[M	T] [NI	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	\]
ſR	I) [SC	is (SD)	ITNI	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PF	1

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
۱.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0	\$0
	Equity	\$600,000	\$600,000
	☐ Common ☐ Preferred	·	
	Convertible Securities (including warrants)	\$See above	\$See above
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$600,000	\$600,000
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ000,000	Ψοσο,σοσ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$600,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	4	\$600,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	0	\$0
	Regulation A	0	\$0
	Rule 504	0	\$0
	Total	0	\$0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[\$
	Printing and Engraving Costs		
	Legal Fees	_	▼ \$To be determined
	Accounting Fees		\$
	Engineering Fees	_	\$
	Sales Commissions (specify finder's fees separately)	_	7 \$
	Other Expenses (identify)]
	Total	[To be determined

Question 1 and total expenses furr	the aggregate offering price given in response to Part C - ished in response to Part C - Question 4.a. This differer uer."	ice is the		\$ 600,000
used for each of the purposes she estimate and check the box to the	e adjusted gross proceeds to the issuer used or propose own. If the amount for any purpose is not known, fur left of the estimate. The total of the payments listed mu issuer set forth in response to Part C - Question 4.b. abo	nish an st equal		
		·	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		□ \$	 	□ \$
Purchase of real estate		_		
Purchase, rental or leasing an	d installation of machinery and equipment	\$		□ \$
Construction or leasing of pla	ant buildings and facilities			\$
offering that may be used in e issuer pursuant to a merger).	(including the value of securities involved in this exchange for the assets or securities of another			□ \$ □ \$
Working capital		□ \$		⊠ \$600,000
		□ \$		□ s
		□ \$_		S \$600,000
Total Payments Listed (colum	nn totals added)			⊠ \$600,000
	D. FEDERAL SIGNATURE			
ne issuer has duly caused this notice llowing signature constitutes an unde staff, the information furnished by the	e to be signed by the undersigned duly authorized per rtaking by the issuer to furnish to the U.S. Securities and the issuer to any non-accredited investor pursuant to parage	son. If this Exchange graph (b)(2)	s notice is file Commission, of Rule 502.	ed under Rule 505, the upon written request of
suer (Print or Type)	Signature	Dat		
STIPS, Inc.			cember 15	, 2003
ame or Signer (Print or Type)	Title of Signer (Print or Type)			
ichard Gingras	President			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)